#### **INSTRUCTONS**

PLEASE READ ALL INSTRUCTIONS CAFEFULLY PFFCRE COMPLETING THIS FORM

**Anti-Discrimination Notice**. It is illegal to discriminate against any individual (other than an alien not authorized to work in the U.S.) in hiring, discharging, or recruiting or referring for a fee because of that individual's national origin or citizenship status. It is illegal to discriminate against work eligible individuals. Employees CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

**Section 1 - Employee.** All employees, citizens and noncitizens, hired after November 6, 1986, must complete Section 1 this form at the time of hire, which is the actual beginning of employment. The employer is responsible for ensuring that Section 1 is timely and properly completed.

**Preparer/Translator Certification.** The Preparer/Translator Certification must be completed if Section 1 is prepared by a person other than the employee. A preparer/translator may be used only when the employee is unable to complete Section 1 on his/her own. However, the employee must still sign Section 1 personally.

**Section 2 - Employer.** For the purpose of completing this form, the term "employer" includes those recruiters and referrers for a fee who are agricultural associations, agricultural employers, or farm labor contractors.

Employers must complete Section 2 by examining evidence of identity and employment eligibility within three (3) business days of the date employment begins. If employees are authorized to work, but are unable to present the required document(s) within three business days, they must present a receipt for the application of the document(s) within three business days and the actual document(s) within ninety (90) days. However, if employers hire individuals for a duration of less than three business days, Section 2 must be completed at the time employment begins. Employers must record: 1) document title; 2) issuing authority; 3) document number, 4) expiration date, if any; and 5) the date employment begins. Employers must sign and date the certification. Employees must present original documents. Employers may, but are not required to, photocopy the document(s) presented. These photocopies may only be used for the verification process and must be retained with the I-9. However, employers are still responsible for completing the I-9.

#### Section 3 - Updating and Reverification.

Employers must complete Section 3 when updating and/or reverifying the I-9. Employers must reverify employment eligibility of their employees on or before the expiration date recorded in Section 1. Employers **CANNOT** specify which documents(s) they will accept from an employee

- If an employee's name has changed at the time this form is being updated/reverified, complete Block A.
- If an employee is rehired within three (3) years of the date this form was originally completed and the employee is still eligible to be employed on the same basis as previously indicated on this form (updating), complete Block B and the signature block.

- and If an employee is rehired within three (3) years of the date of this form was originally completed and the employee's work authorization has expired or if a current employee's work authorization is about to expire (reverification), complete Block B and :
  - examine any document that reflects that the employee was authorized to work in the U.S. (see List A or C).
  - record the document title, document number and expiration date (if any) in Block C, and
  - complete the signature block.

**Photocopying and Retaining Form I-9.** A blank I-9 may be reproduced provided both sides are copied. The Instructions must be available to all employees completing this form. Employers must retain completed I-9s for three (3) years after the date of hire **or** one (1) year after the date employment ends, whichever is later.

For more detailed information, you may refer to the INS <u>Handbook or Employers</u>, (Form M-274). You may obtain the handbook at your local INS office.

**Privacy Act Notice.** The authority for collecting this information is the Immigration Reform and Control Act of 1986, Pub. L. 99-603 (8 U.S.C. 1324a).

This information is for employers to verify the eligibility of individuals for employment to preclude the unlawful hiring, or recruiting or referring for a fee, of aliens who are not authorized to work in the United States.

This information will be used by employers as a record of their basis for determining eligibility of an employee to work in the United States. The form will be kept by the employer and made available for inspection by officials of the U.S. Immigration and Naturalization Service, the Department of Labor, and the Office of Special Counsel for Immigration Related Unfair Employment Practices.

Submission of the information required in this form is voluntary. However, an individual may not begin employment unless this form is completed since employers are subject to civil or criminal penalties if they do not comply with the Immigration Reform and Control Act of 1986.

Reporting Burden. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. Accordingly, the reporting burden for this collection of Information is computed as follows: 1) learning about this form, 5 minutes; 2) completing the form, 5 minutes; and 3) assembling and filing (recordkeeping) the form, 5 minutes, for an average of 15 minutes per response. If you have comments regarding the accuracy of this burden estimate, or suggestions for making this form simpler, you can write to both the Immigration and Naturalization Service, 425 I Street, N.W., Room, 5304, Washington. D.C. 20536; and the Office of Management and Budget, Paperwork Reduction Project, OMB No. 1115-0136, Washington D.C. 20503.

## **U.S.** Department of Justice

Immigration and Naturalization Service

# OMB No. 1115-136 **Employment Eligibility Verification**

Please read instructions carefully before completing this form. The instructions must be available during completion of this form. ANTI-DISCRIMINATION NOTICE. It is illegal to discriminate against work eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1.	Employee Information ar	nd Verificat	ion. To be completed and si	igned by emp	ployee at the time employment begins					
Print Name:	Last	First	Middle Ini	itial N	Maiden Name					
Address (Street	t Name and Number)		Apt. #	1	Date of Birth (month/day/year)					
City	State		Zip Code		Social Security #					
imprisonme use of false	that federal law provides for ent and/or fines for false star documents in connection v of this form.	tements or	I attest, under penalty of perjury, that I am (check one of the following):  A citizen or national of the United States  A Lawful Permanent Resident (Alien # A  An alien authorized to work until / /  (Alien # or Admission #							
Employee's Sig	nature				Date (month/day/year)					
Preparer and/or Translator Certification. (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.										
Pre	eparer's/Translator's Signature		Print Name							
Ad	dress (Street Name and Number, Cit	y, State, Zip Cod	le)	Date (month/day/year)						
Section 2. Employer Review and Verification. To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C as listed on the reverse of this form and record the title, number and expiration date, if any, of the document(s)										
	List A	OR	List B	AND	List C					
Document Title:	:	_		_						
Issuing authority	y:	_		_						
		_		_						
	n Date (if any)://		//		//					
	n Date (if any):									
Expiration Date (if any): / / CERTIFICATION – I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) / and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment).										
Signature of Em	nployer or Authorized Representative	Print Name			Title					
Business or Org	ganization Name Address (Stree	et Name and Nu	mber, City, State, Zip Code)	de) Date (month, day, year)						
Section 3.	Updating and Reverificat	tion. To be co	mpleted and signed by employ	/er						
A. New Name	(if applicable)		B. Date of rehire	(month/day/	vear) (if applicable)					
C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.										
Document Title:	·	Document #:_		Expirati	on Date (if any): / /					
	penalty of perjury, that to the best ument(s), the document(s) I have e				ne United States, and if the employee ridual					
Signature of Em	nployer or Authorized Representative		Date (month/day/year	r)						

### LISTS OF ACCEPTABLE DOCUMENTS

LIST C

LIST B

D	ocument that Establish Both Identity and Employment Eligibility	OR		Documents that Establish Identity	AND		Documents that Establish Employment Eligibility	
	U.S. Passport (unexpired or expired)		1.	Driver's license or ID card issued by a state or outlying possession of the United Slates provided it contains a		1.	U.S. social security card issued by the Social Security Administration (other than a card stating it is not valid for	
	Certificate of U.S. Citizenship (INS Form N-560 or N-561)			photograph or information such as name, date of birth, sex, height, eye color, and address			employment)	
3.	Certificate of Naturalization (INS Form N-550 or N-570)		2.	ID card issued by federal, state, or local government agencies or entities provided		2.	Certification or Birth Abroad issued by the Department of State (Form FS-545 or Form DS-1350)	
4.	Unexpired foreign passport, with <i>I-551 stamp</i> or attached <i>INS Form I-94</i> indicating unexpired employment			it contains a photograph or information such as name, date of birth, sex. height, eye color, and address		3.	Original or certified copy of a	
_	authorization  Alien Registration Receipt Card		3.	School ID card with a photograph		<b>.</b>	birth certificate issued by a state, county, municipal authority or outlying	
J.	with photograph (INS Form, I- 151 or I-551)		4. 5.	Voter's registration card U.S. Military card or draft			possession of the United States bearing an official seal	
6.	Unexpired Temporary Resident Card (INS Form I-688)		6.	record Military dependent's ID card		4.	Native American tribal document	
7.	Unexpired Employment Authorization Card (INS Form		7. 8.	U.S. Coast Guard Merchant Mariner Card Native American tribal		5.	U.S. Citizen ID Card (INS	
	I-688A)			document  Drivers license issued by a			Form I-197)	
8.	Unexpired Reentry Permit (INS Form I-327)			Canadian government authority		6.	ID Card for use of Resident Citizen in the United Stales	
9.	Unexpired Refugee Travel Document (INS Form I-571)		Fo	or persons under age 18 who are unable to present a document listed above:			(INS Form I-179)	
10.	Unexpired Employment Authorization Document issued by the INS which contains a			School record or report card  Clinic, doctor, or hospital		7.	Unexpired employment authorization document issued by the INS (other than those listed under List A)	
	photograph (INS Form I-688B)	12	12.	record  Day-care or nursery school record				

LIST A